OT 22 2004

PETITION FO

Art Unit 2625

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Docket Number (Optional) 16869P-020000US

Examiner Yosef Kassa

FY 2005

(fees effective on or after October 1, 2004)

Application Number, 09/802 687

Filed, March 8, 2001

Application Number 09/802,687 Filed March 8, 2001

For IMAGE ALIGNMENT METHOD, COMPARATIVE INSPECTION

OCT

METHOD, AND COMPARATIVE INSPECTION DEVICE FOR COMPARATIVE INSPECTIONS

Technology Center 2600

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

				<u>Fee</u>	Small Entity Fee			
		One month	n (37 CFR 1.17(a)(1))	\$110	\$55	\$		
	\boxtimes	Two month	ns (37 CFR 1.17(a)(2))	\$430	\$215	\$ 430		
	☐ Three mon		ths (37 CFR 1.17(a)(3))	\$980	\$490	\$		
		Four mont	hs (37 CFR 1.17(a)(4))	\$1530	\$765	\$		
		Five month	ns (37 CFR 1.17(a)(5))	\$2080	\$1040	\$		
	Applicant claims small entity status. See 37 CFR 1.27.							
	A check in the amount of the fee is enclosed.							
	Payment by credit card. Form PTO-2038 is attached.							
⊠	The Director has already been authorized to charge fees in this application to a Deposit Account.							
	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
l ar	n the		applicant/inventor.					
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).							
		\boxtimes	attorney or agent of record	per <u>44,612</u>				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34								
-		S	Signature		/o/19/09			
	Steve Y. Cho, Reg. No. 44,612			2	. 650-326	-2400		
-	Typed or printed name				Telephone	Number		
NOTE:	Signatur	es of all the inv	entors or assignees of record of the e	ntire interest or their repres	sentative(s) are required. Submit	t multiple forms if more than		

forms are submitted.

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▼ Total of 1

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one signature is required, see below.

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